



3739

PATENT
Attorney Docket No. BSC-128 (1002/193)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Gellman et al. CONFIRMATION NO.: 3367
SERIAL NO.: 09/939,114 GROUP NO.: 3739
FILING DATE: August 24, 2001 EXAMINER: Not Yet Assigned
TITLE: Forward Deploying Suturing Device and Methods of Use

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

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Tabitha Crosier

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Submitted herewith is/are:

1. Transmittal Form (1 pg.);
2. Supplemental Information Disclosure Statement (2 pages);
3. Supplemental Form PTO-1449 (1 page);
4. Copies of IDS references A20-A24 and B1;
5. Associate Power of Attorney (2 pages); and
6. Return receipt postcard.

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TRANSMITTAL FORM

Application Serial Number	09/939,114
Filing Date	August 24, 2001
First Named Inventor	Gellman
Group Art Unit	3739
Examiner Name	Not Yet Assigned
Attorney Docket No.	BSC-128 (1002/193)
Patent No.	Not applicable
Issue Date	Not applicable

ENCLOSURES (check all that apply)

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<input type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]	<input type="checkbox"/> Formal Drawing(s)	<input type="checkbox"/> Appeal Brief (in triplicate)
<input type="checkbox"/> Petition for Extension of Time	<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal	<input type="checkbox"/> Status Inquiry
<input checked="" type="checkbox"/> Supplemental Information Disclosure Statement <input checked="" type="checkbox"/> Supplemental Form PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations (A20-A24, B1)	<input checked="" type="checkbox"/> Associate Power of Attorney	<input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8
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